

UNITED STATES DISTRICT COURT
DISTRICT OF OREGON

Civil Case No. 2:18-cv-467-HZ

FELIX ESPINOZA-QUIROZ,

Plaintiff,

v.

**BRAD CAIN, Superintendent, Snake
River Correctional Institution,**

Defendant(s).

**APPLICATION TO PROCEED
IN FORMA PAUPERIS**

I, Felix Espinoza-Quiroz, declare that I am the plaintiff in the above entitled proceeding; that, in support of my request to proceed without prepayment of fees under 28 U.S.C. § 1915, I declare that I am unable to pay the fees for this proceeding or give security therefore and that I am entitled to the relief sought in the complaint.

In support of this application, I answer the following questions:

1. Are you currently incarcerated: Yes No

If "Yes" state the place of your incarceration: Snake River Correctional Institution

If "Yes" and you are filing a civil action, have the institution fill out the Certificate portion of this and attach a certified copy of your prison trust account showing transactions for the past six (6) months.

2. Are you currently employed? Yes No Self-employed

a. If the answer is "Yes" state:

Employer's name: Snake River Correctional Institution

Employer's address: Snake River Correctional Institution

Amount of take-home pay or wages: \$ 58.00 per Month *(specify pay period)*

b. If the answer is "No," state:

Name of last employer: NA

Address of last employer: NA

Date of last employment: April 29th 2010

Amount of take home salary or wages: \$ NA *(specify pay period)*

3. Is your spouse or significant-other employed? Yes No Self-employed Not applicable

If the answer is "Yes," state:

Employer's name: NA

Employer's address: NA

Amount of take-home pay or wages: \$ NA *(specify pay period)*

4. In the past 12 months have you received any money from any of the following sources?

a. Business, profession or other self-employment Yes No

If "Yes," state: Amount received: \$ NA

Amount expected in future: \$ NA

b. Rent payments, interest, or dividends Yes No

If "Yes," state: Amount received: \$ NA

Amount expected in future: \$ NA

c. Pensions, annuities or life insurance payments Yes No

If "Yes," state: Amount received: \$ NA

Amount expected in future: \$ NA

d. Disability or workers compensation payments [] Yes [X] No

If "Yes," state: Amount received: \$ NA

Amount expected in future: \$ NA

e. Gifts or inheritances [] Yes [X] No

If "Yes," state: Amount received: \$ NA

Amount expected in future: \$ NA

f. Any other sources [] Yes [X] No

If "Yes," state: Amount received: \$ NA

Amount expected in future: \$ NA

5. Do you have cash or checking or savings accounts? [X] Yes Prison trust saving for release
(including prison trust accounts)?

If "Yes," state the total amount: \$ 1.200

6. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or other valuable property? [] Yes [X] No

If "Yes," describe the asset(s) and state the value of each asset listed.

NA

7. Do you have any other assets? [] Yes [X] No

If "Yes," list the asset(s) and state the value of each asset listed.

NA

8. Do you have any housing, transportation, utilities, or loan payments, or other regular monthly expenses? [X] Yes Food and hygiene [] No

If "Yes," describe and provide the amount of the monthly expense.

\$ 58.00 for food and hygiene

9. List the persons (or, if under 18, initials only) who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support.

NA

10. Do you have any debts or financial obligations? Yes No

If "Yes" describe the amounts owed and to whom they are payable.

NA

I hereby authorize the agency having custody of me to collect from my trust account and forward to the Clerk of the United States District Court payments toward the full filing fee of \$400.00 for a prisoner civil rights complaint or \$5.00 for a petition for writ of habeas corpus in accordance with the Prison Litigation Reform Act, P.L. 104-134 (110 Stat. 1321), Section 804(a)(to be codified at 28 U.S.C. § 1915(b)).

I declare under penalty of perjury that the above information is true and correct.

3-16-2018

DATE

Felix Espinoza Quiroz
SIGNATURE OF APPLICANT
Felix Espinoza-Quiroz

REQUEST FOR 6-MONTH PRINTOUT
OF
INMATE TRUST ACCOUNT

Inmate's Name: Felix Espinoza

S.I.D.: 18447509

Housing: 3-J-0413

I, Felix Espinoza, request a printout of my inmate trust account for the past six months (provided that I've been in ODOC custody for that period of time). This request is made in accordance with ORS 30.643

(2) Any inmate seeking waiver of deferral of fees or court costs must submit with the application for waiver or deferral a certified copy of the inmate's trust account statement for the six-month period immediately preceding the filing of the complaint, petition, notice of appeal or petition for review. The statement must be certified as correct by an official of each correctional facility in which the inmate was confined with the six-month period or by an employee of the Department of Corrections charged with the responsibility of overseeing inmate trust accounts.

This request is necessary because I am filing a Federal Habeas corpus and

Malheur County court requires this information prior to granting indigent status.

Felix Espinoza Quiroz
(Signature)

2-25-2018
(Date)

T R U S T A C C O U N T S T A T E M E N T

12.1.1.0.1.0 ODOC

DOC: 0018447509 Name: ESPINOZA-QUIROZ, FELIX DOB: 05/18/1955
 LOCATION: SRCI-C3_J-3J04B

Max Date:

ACCOUNT BALANCES Total : 1,175.38 CURRENT: 1,175.38 HOLD: 0.00
 08/28/2017 02/28/2018

SUB ACCOUNT	START BALANCE	END BALANCE
INMATE SPENDING ACCOUNT	1,205.77	1,175.38
RESERVE OPTICAL	0.00	0.00

DEBTS AND OBLIGATIONS

TYPE	PAYABLE	INFO NUMBER	AMOUNT OWING	AMOUNT PAID
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TRANSACTION DESCRIPTIONS --			INMATE SPENDING	SUB-ACCOUNT
DATE	TYPE	TRANSACTION DESCRIPTION	TRANSACTION AMT	BALANCE
08/28/2017	CRS	CRS SAL ORD #7283502SRCI	(30.43)	1,175.34
08/29/2017	CSR	CSR SAL ORD #7283502	1.30	1,176.64
09/07/2017	AWD	AWARDS 08/2017 SRCI	62.47	1,239.11
09/07/2017	DED	Deduction-CLR-11102010 D	29.88	1,268.99
09/07/2017	DED	Deduction-CLR-11102010 D	0.12	1,269.11
09/07/2017	DED	Deduction-CLR-11102010 D	(0.12)	1,268.99
09/07/2017	AWD	AWARDS 08/2017 SRCI	0.23	1,269.22
09/07/2017	DED	Deduction-CLR-11102010 D	(29.88)	1,239.34
09/11/2017	INT1	Interest Distribution	1.40	1,240.74
09/26/2017	CRS	CRS SAL ORD #7321798SRCI	(30.08)	1,210.66
10/04/2017	INT1	Interest Distribution	1.43	1,212.09
10/05/2017	AWD	AWARDS 09/2017 SRCI	58.90	1,270.99
10/05/2017	DED	Deduction-CLR-11102010 D	29.45	1,300.44
10/05/2017	DED	Deduction-CLR-11102010 D	(29.45)	1,270.99
10/09/2017	CRS	CRS SAL ORD #7340946SRCI	(33.68)	1,237.31
10/31/2017	2453	Nov. Chicken Meal SRCI	(7.30)	1,230.01
11/06/2017	CRS	CRS SAL ORD #7379038SRCI	(40.12)	1,189.89
11/07/2017	INT1	Interest Distribution	1.46	1,191.35
11/09/2017	DED	Deduction-CLR-11102010 D	(30.00)	1,161.35
11/09/2017	AWD	AWARDS 10/2017 SRCI	62.70	1,224.05
11/09/2017	DED	Deduction-CLR-11102010 D	30.00	1,254.05
11/29/2017	CRS	CRS SAL ORD #7411824SRCI	(52.37)	1,201.68
12/01/2017	CSR	CSR SAL ORD #7411824	3.58	1,205.26
12/04/2017	CRS	CRS SAL ORD #7417789SRCI	(54.50)	1,150.76
12/07/2017	DED	Deduction-CLR-11102010 D	29.45	1,180.21

CERTIFIED TO BE A TRUE COPY
 SIGNED *Chadekin*
 FOR OREGON DEPT OF CORRECTIONS
 SNAKE RIVER CORRECTIONAL INSTITUTION
 ON THIS DATE *2-28-18*

TRUST ACCOUNT STATEMENT

12.1.1.0.1.0 ODOC

DOC: 0018447509 Name: ESPINOZA-QUIROZ, FELIX DOB: 05/18/1955
 LOCATION: SRCI-C3_J-3J04B

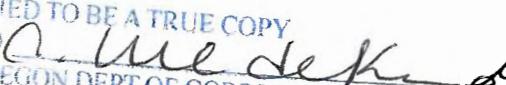
Max Date:

DATE	TYPE	TRANSACTION DESCRIPTION	TRANSACTION AMT	BALANCE
12/07/2017	DED	Deduction-CLR-11102010 D	(29.45)	1,150.76
12/07/2017	AWD	AWARDS 11/2017 SRCI	58.90	1,209.66
12/11/2017	INT1	Interest Distribution	1.58	1,211.24
12/11/2017	CRS	CRS SAL ORD #7429702SRCI	(25.92)	1,185.32
12/20/2017	CRS	CRS SAL ORD #7447104SRCI	(19.77)	1,165.55
01/04/2018	DED	Deduction-CLR-11102010 D	30.00	1,195.55
01/04/2018	DED	Deduction-CLR-11102010 D	(30.00)	1,165.55
01/04/2018	AWD	AWARDS 12/2017 SRCI	62.70	1,228.25
01/08/2018	CRS	CRS SAL ORD #7469642SRCI	(34.50)	1,193.75
01/10/2018	INT1	Interest Distribution	1.54	1,195.29
01/22/2018	CRS	CRS SAL ORD #7483344	(25.24)	1,170.05
02/09/2018	DED	Deduction-CLR-11102010 D D	(30.00)	1,140.05
02/09/2018	DED	Deduction-CLR-11102010 D D	30.00	1,170.05
02/09/2018	AWD	AWARDS 01/2018 SRCI	3.82	1,173.87
02/09/2018	AWD	AWARDS 01/2018 SRCI	62.68	1,236.55
02/12/2018	CRS	CRS SAL ORD #7511730	(33.86)	1,202.69
02/16/2018	INT1	Interest Distribution	1.63	1,204.32
02/26/2018	CRS	CRS SAL ORD #7531343	(23.94)	1,180.38
02/28/2018	CDR	US DIST COURT	(5.00)	1,175.38

TRANSACTION DESCRIPTIONS --

RESERVE OPTICAL SUB-ACCOUNT

DATE	TYPE	TRANSACTION DESCRIPTION	TRANSACTION AMT	BALANCE

CERTIFIED TO BE A TRUE COPY
 SIGNED 
 FOR OREGON DEPT OF CORRECTIONS
 SNAKE RIVER CORRECTIONAL INSTITUTION
 ON THIS DATE 

CERTIFICATE

(To be completed by the institution of incarceration.)

I certify that Espinoza-Quiroz, Felix #18447509 (name of applicant) has the sum of \$ 1175.38

on account to his/her credit at Snake River Correctional Institution (name of institution). I further certify that during the past six months the applicant's average monthly balance was \$ 1208.93.

I further certify that during the past six months the average of monthly deposits to the applicant's account was \$ 46.55.

I have attached a certified copy of the applicant's trust account statement showing the transactions for the past six months.

02/28/2018

DATE

C. Lee deKend
SIGNATURE OF AUTHORIZED OFFICER